

ALPHABETICAL LISTING OF LONG-TERM CARE PROVIDERS WITH COMPLAINTS (Complaint Log)

From 05/01/2005 To 08/31/2006

Northern Virginia Long Term Care Ombudsman Program
12011 Government Center Pkwy, Suite 708, Fairfax, VA. 22035-1104
Intake line: (703) 324-5861

M = Mediation

S = Systemic (facility-wide issues)

Annaburg Manor , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	B.13S Information regarding rights, benefits, services	Verified	Resolved
	B.15S Staffing information not posted	Verified	Resolved
	D.32S Privacy in treatment, confidentiality	Verified	Resolved
	F.41S Call lights, response to requests for assistance	Verified	Resolved
	M.97S Shortage of staff	Verified	Partially Resolved
Case 2-M	L.95 Communication with Family	Not Verified	Resolved
Case 3	C.19 Discharge/eviction - planning, notice, procedure	Verified	Not Resolved

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Arden Courts, ManorCare Health Services , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	D.26 Dignity, respect - staff attitudes	Verified	Not Resolved
	F.45 Personal hygiene (includes oral hygiene)	Verified	Not Resolved
	K.78 Cleanliness, pests	Verified	Not Resolved
	L.88 Administrator(s) unresponsive, unavailable	Verified	Not Resolved

Burke HealthCare Center , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5 Gross neglect	Not Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.47 Pressure sores	Verified	Not Resolved
	M.98 Staff training, lack of screening	Verified	Resolved

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Cardinal Nursing and Rehabilitation Center at The Virginian, The , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.1 Abuse, physical (including corporal punishment)	Verified	Resolved
Case 2	F.48 Symptoms unattended, no notice to others of change in condition	Not Verified	Resolved
	F.52 Facility required unnecessary private sitter	Not Verified	Resolved

Fairfax Nursing Center, Inc. , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1-M	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved

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Greenspring Village, Inc. , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Not Verified	Not Resolved

Heatherwood Retirement Community , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure		Withdrawn
Case 2	C.16 Admission contract and/or procedure	Verified	Not Resolved
	D.33 Response to complaints	Verified	Not Resolved

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Home ElderCare , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.5 Gross neglect	Verified	Resolved
	C.16 Admission contract and/or procedure	Verified	Resolved
	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	L.87 Abuse investigation/reporting	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

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Iliff Nursing and Rehabilitation Center , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 2	F.44 Medications - administration, organization	Verified	Resolved
	F.45 Personal hygiene (includes oral hygiene)	Verified	Resolved
	K.78 Cleanliness, pests	Verified	Resolved
	K.79 Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved

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INOVA Commonwealth Care Center , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	M.97 Shortage of staff	Not Verified	Resolved
Case 2	D.32 Privacy in treatment, confidentiality	Verified	Resolved
	K.78 Cleanliness, pests	Verified	Resolved
	K.79 Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
Case 3	E.38 Personal property lost, stolen, used by others, destroyed	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved

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Johnson Center at Falcon's Landing , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.22 Room assignment/room change	Not Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.48 Symptoms unattended, no notice to others of change in condition	Verified	Resolved
	J.76 Improper Weighing	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
Case 2	B.8 Access to own records	Verified	Resolved
	C.16 Admission contract and/or procedure	Verified	Resolved
	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Partially Resolved
Case 3	F.44 Medications - administration, organization	Not Verified	Withdrawn
	J.75 Weight loss due to inadequate nutrition	Not Verified	Withdrawn
	M.96 Communication, language barrier	Not Verified	Withdrawn

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Leewood Healthcare Center , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.45 Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	F.50 Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use	Not Verified	Resolved
	M.101 Supervision	Not Verified	Resolved
Case 2	C.19 Discharge/eviction - planning, notice, procedure	Verified	Partially Resolved
Case 3	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 4	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 5	F.45 Personal hygiene (includes oral hygiene)	Verified	Partially Resolved

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Lincolnia Senior Residences , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	I.67 Social services - availability/appropriateness	Not Verified	Not Resolved

ManorCare Health Services - Alexandria , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Not Verified	Resolved
Case 2	F.44 Medications - administration, organization	Verified	Resolved
	F.47 Pressure sores	Not Verified	Resolved
Case 3	C.18 Bed hold - written notice, refusal to readmit	Verified	Resolved

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ManorCare Health Services - Arlington , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	E.38 Personal property lost, stolen, used by others, destroyed	Verified	Partially Resolved

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ManorCare Health Services - Fair Oaks , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	D.27 Exercise choice and/or civil rights (includes right to smoke)	Not Verified	Partially Resolved
	D.34 Reprisal, retaliation	Not Verified	Partially Resolved
Case 2	M.97S Shortage of staff	Verified	Partially Resolved
Case 3	A.5 Gross neglect	Not Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
Case 4	A.1 Abuse, physical (including corporal punishment)	Verified	Resolved
Case 5	F.50 Tubes - neglect of catheter, gastric, NG tube (use D.28 for inappropriate/forced use)	Verified	Partially Resolved
Case 6	A.5 Gross neglect	Verified	Resolved
Case 7	F.40 Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved

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Case 7	F.44	Medications - administration, organization	Not Verified	Resolved
	L.90	Inadequate record-keeping	Verified	Resolved
Case 8	C.19	Discharge/eviction - planning, notice, procedure	Not Verified	Resolved
	F.48	Symptoms unattended, no notice to others of change in condition	Verified	Resolved
	F.52	No Notification to Physician/No orders Given to Transfer	Verified	Resolved
	M.98	Staff training, lack of screening	Verified	Resolved
Case 9	F.44	Medications - administration, organization	Verified	Resolved
Case 10	F.40	Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44	Medications - administration, organization	Verified	Resolved

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Mount Vernon Nursing Center , Nursing Facility

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Case 1	C.19 Discharge/eviction - planning, notice, procedure	Not Verified	Resolved
	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Partially Resolved

Potomac Center, Genesis ElderCare Network , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.40 Accidental or injury of unknown origin; falls; improper handling	Not Verified	Withdrawn
	F.48 Symptoms unattended, no notice to others of change in condition	Not Verified	Withdrawn
Case 2	B.8 Access to own records	Not Verified	Resolved
	E.38 Personal property lost, stolen, used by others, destroyed	Not Verified	Resolved
	F.45 Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	F.47 Pressure sores	Not Verified	Resolved
	F.49 Toileting, incontinent care	Not Verified	Resolved
	G.53 Assistive devices or equipment	Not Verified	Resolved

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Professional Health Care , Home Health Agency

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	G.58 Therapies, outside	Verified	Resolved

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Renaissance Gardens , Nursing Facility

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Case 1	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	F.49 Toileting, incontinent care	Not Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
	M.101 Supervision	Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 2	A.5 Gross neglect	Not Verified	Resolved
	F.40 Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
Case 3	F.51 Wandering, failure to accommodate/monitor	Verified	Resolved

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Ruxton Health of Alexandria (Formerly I.H.S.) , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.19 Discharge/eviction - planning, notice, procedure	Verified	Resolved
Case 2	K.79 Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved

Ruxton Health of Woodbridge , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	B.11 Information regarding advance directive(s)	Not Verified	Resolved

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Sleepy Hollow Manor Nursing Home , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	G.57 Range of motion/ambulation/exercise	Not Verified	Resolved
Case 2	D.26S Dignity, respect - staff attitudes	Verified	Resolved
	K.83S Odors	Verified	Resolved
	M.100 Staff unresponsive, unavailable	Verified	Resolved
	M.101 Supervision	Verified	Resolved
Case 3	A.5 Gross neglect	Not Verified	Resolved
	F.40 Accidental or injury of unknown origin; falls; improper handling	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Partially Resolved
	F.45 Personal hygiene (includes oral hygiene)	Verified	Not Resolved
Case 4	C.22 Room assignment/room change	Not Verified	Resolved
	L.88 Administrator(s) unresponsive, unavailable	Not Verified	Resolved
Case 5	M.97 Shortage of staff	Verified	Partially Resolved

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Case 6	A.5	Gross neglect	Not Verified	Resolved
	F.45	Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	F.47	Pressure sores	Not Verified	Resolved
	J.70	Fluid availability/hydration	Not Verified	Resolved
	J.75	Weight loss due to inadequate nutrition	Not Verified	Resolved

Sunrise Assisted Living of Arlington , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	I.64S Activities - choice and appropriateness	Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved

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Sunrise at Bluemont Park , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	D.26 Dignity, respect - staff attitudes	Verified	Partially Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Not Verified	Partially Resolved
Case 2	C.22 Room assignment/room change	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved
Case 3	B.12 Information regarding medical condition, treatment and any changes	Not Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	H.62 Psychoactive drugs - assessment, use, evaluation	Not Verified	Resolved
	M.97 Shortage of staff	Not Verified	Resolved
Case 4	C.18 Bed hold - written notice, refusal to readmit	Verified	Resolved

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Sunrise at Hunter Mill , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	F.45S Personal hygiene (includes oral hygiene)	Not Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved
	K.83 Odors	Verified	Resolved
	M.97S Shortage of staff	Not Verified	Resolved

Sunrise at McLean , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	J.71 Menu - quantity, quality, variation, choice,condiments, utensils	Verified	Partially Resolved

Sunrise at Mount Vernon , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	L.88 Administrator(s) unresponsive, unavailable	Verified	Resolved

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Sunrise at Reston Town Center , Assisted Living Facility

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Case 1	E.36 Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved
Case 2	C.22 Room assignment/room change	Not Verified	Resolved
	C.23 Communication Regarding Room Assignment	Verified	Resolved
Case 3	B.12 Information regarding medical condition, treatment and any changes	Verified	Resolved
	C.22 Room assignment/room change	Verified	Partially Resolved
	E.38 Personal property lost, stolen, used by others, destroyed	Verified	Partially Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.46 Physician services, including podiatrist	Not Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

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Sunrise of Alexandria , Assisted Living Facility

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Case 1	B.13S Information regarding rights, benefits, services	Verified	Not Resolved
	K.78S Cleanliness, pests	Verified	Not Resolved
	K.83S Odors	Verified	Resolved
	K.85S Supplies and linens	Verified	Resolved
Case 2	C.22 Room assignment/room change	Verified	Resolved
	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.51 Wandering, failure to accommodate/monitor	Verified	Resolved
	L.95 Alarms not heard on third floor	Verified	Partially Resolved
	M.101 Supervision	Verified	Resolved
	M.98 Staff training, lack of screening	Verified	Resolved
Case 3	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.44 Medications - administration, organization	Verified	Resolved
	H.62 Psychoactive drugs - assessment, use, evaluation	Verified	Resolved
	J.76 Assistance to dining area	Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved

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Case 3	K.79S	Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	L.90	Inadequate record-keeping	Verified	Resolved
Case 4	E.36	Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved

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M = Mediation

S = Systemic (facility-wide issues)

Sunrise of Springfield , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	I.68S Current calendar not displayed	Verified	Resolved
	K.78S Cleanliness, pests	Verified	Resolved
	K.79S Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
Case 2	J.76 Food storage	Verified	Resolved
	K.78 Cleanliness, pests	Verified	Resolved
	K.79 Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
Case 3	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Not Verified	Resolved
	I.64 Activities - choice and appropriateness	Not Verified	Resolved
	K.78 Cleanliness, pests	Verified	Resolved
	K.79 Equipment/building-disrepair, hazard, poor lighting, fire safety, no handicapped access, not secure	Verified	Resolved
	M.100 Staff unresponsive, unavailable	Not Verified	Resolved

ALPHABETICAL LISTING OF LONG-TERM CARE PROVIDERS WITH COMPLAINTS (Complaint Log)

From 05/01/2005 To 08/31/2006

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Case 4	E.36	Billing charges - notice, approval, questionable, accounting wrong or denied	Verified	Resolved
Case 5	D.26	Dignity, respect - staff attitudes	Verified	Resolved
	D.32	Privacy in treatment, confidentiality	Verified	Resolved
	F.42	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.42	Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Not Verified	Resolved
	F.52	Agreed plan for 2 hour checks not followed	Verified	Resolved
	F.52	Labs ordered not obtained	Verified	Resolved
	J.76	Agreement that meals served in room	Not Verified	Resolved

Virginian, The , Assisted Living Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.1 Abuse, physical (including corporal punishment)	Not Verified	Resolved
	L.87 Abuse investigation/reporting	Verified	Resolved
	M.100 Staff unresponsive, unavailable	Verified	Resolved

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Washington House, The , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	C.17 Appeal process - absent, not followed	Verified	Partially Resolved
	C.19 Discharge/eviction - planning, notice, procedure	Verified	Partially Resolved
Case 2	F.42 Care plan/resident assessment-inadequate, lack of patient/family involvement, failure to follow plan	Verified	Resolved
	F.46 Physician services, including podiatrist	Not Verified	Resolved
	F.47 Pressure sores	Verified	Resolved
	L.90 Inadequate record-keeping	Verified	Resolved

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Woodbine Rehabilitation and Healthcare Center , Nursing Facility

<u>File Number</u>	<u>Category</u>	<u>Verification</u>	<u>Disposition</u>
Case 1	A.7 Other - Abuse, Gross Neglect, Exploitation	Not Verified	Resolved
	G.53 Assistive devices or equipment	Not Verified	Resolved
	J.74 Therapeutic diet	Verified	Resolved
Case 2	A.5 Gross neglect	Not Verified	Resolved
	M.96 Communication, language barrier	Verified	Resolved
Case 3	A.1 Abuse, physical (including corporal punishment)	Not Verified	Resolved